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03/15 '04 13:27 NO.976 01/01

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and send this form, together with applicable fee(s), to: Mail

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7590

02/13/2004

Attention: Eric Levinson
Imation Corp.
Legal Affairs
P.O. Box 64898
St. Paul, MN 55164-0898

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Eric D. Levinson (Depositor's name)
Eric D. Levinson (Signature)
3/15/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/992,712	11/19/2001	Trung V. Lo	10301 US01	5875

TITLE OF INVENTION: APPARATUS SUPPORTING MULTIPLE MEMORY CARD FORMATS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/13/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
BUI, HUNG S		2841	361-737000		

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Eric D. Levinson
2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Imation Corp.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Oakdale, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 2

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Eric D. Levinson (Date)

Eric D. Levinson Reg. No. 35,814 3/15/04

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02 FC:1504	300.00 DA
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PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033

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